

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 196 / 197

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

A Lot of People for Dave Obey

Full Name (Last, First, Middle Initial)

## **A. Friends of Tammy Duckworth Campaign**

Mailing Address 416 West 22nd Street

City Lombard State IL Zip Code 60148

Purpose of Disbursement  
Campaigning for Duckworth Airfare, in-ki

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9322

Date of Disbursement

/   /

Amount of Each Disbursement this Period

383.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Friends of Tammy Duckworth Campaign**

Mailing Address 416 West 22nd Street

City Lombard State IL Zip Code 60148

Purpose of Disbursement  
Campaigning for Duckworth Hotel, in-kind

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9323

Date of Disbursement

/   /

Amount of Each Disbursement this Period

345.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Leonard Boswell for Congress Campaign**

Mailing Address P.O. Box 6220

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Campaigning for Boswell Airfare, in-kind

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D9318

Date of Disbursement

/   /

Amount of Each Disbursement this Period

383.57

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1112.13

**TOTAL** This Period (last page this line number only) .....